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Bib Data Sheet

CONFIRMATION NO. 9429

<b>SERIAL NUMBER</b> 09/776,071	<b>FILING DATE</b> 02/01/2001 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2681	<b>ATTORNEY DOCKET NO.</b> COR185-150117-11
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**APPLICANTS**  
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Mathew Joel Laibowitz, New York, NY;  
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**\*\* CONTINUING DATA \*\*\*\*\***  
THIS APPLN CLAIMS BENEFIT OF 60/253,359 11/28/2000  
AND CLAIMS BENEFIT OF 60/253,358 11/28/2000  
AND CLAIMS BENEFIT OF 60/253,464 11/28/2000  
*YES CA*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
*NONE CA*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
\*\* 06/14/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 11	TOTAL CLAIMS 77	INDEPENDENT CLAIMS 7
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>CA</i> Examiner's Signature Initials				

**ADDRESS**  
Kenneth R. De Rosa  
Wolf, Block, Schorr and Solis-Cohen LLP  
1650 Arch Street - 22 nd Floor  
Philadelphia, PA 19103

**TITLE**  
Method and system for communicating with a wireless device

<b>FILING FEE RECEIVED</b> 1093	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit